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PTO/SB/08A (08-00)

Substitute for form 1449B/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (use as many sheets as necessary)		<b>Complete if Known</b>	
		Application Number	10/650,091
		Filing Date	August 28, 2003
		First Named Inventor	Joseph Francis PERRET, Jr.
		Group Art Unit	3683
Examiner Name	Christopher P. Schwartz		
Sheet 1 of 1	Attorney Docket Number		BLTC001/00US

OTHER - NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
AS	C1	BTE., <i>Primus™, The Functional Rehabilitation System</i> . Baltimore Therapeutic Equipment Co., Hanover, MD. 4 pages (with Statement of Relevance).	
AS	C2	BTE, <i>Work Simulator®, A Versatile Evaluation and Rehabilitation Instrument</i> , Baltimore Therapeutic Equipment Co., Hanover, MD, 4 pages (with Statement of Relevance).	

Examiner Signature	<i>Chris Schwartz</i>	Date Considered	11/22/04
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Unique citation designation number.

<sup>2</sup> Applicant is to place a check mark here if English language Translation attached.



\* Applicant is to place a check mark here if English language Translation is attached.